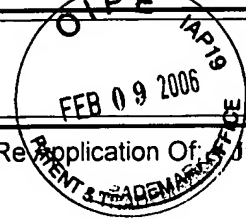


TFu

 TRANSMITTAL LETTER (General - Patent Pending)		Docket No. A440-JN					
In Re Application Of: Jung Ki Lee							
Application No. 10/821762	Filing Date 04/9/04	Examiner Maguire, Lindsay M.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;">Customer No.</td> <td style="width: 50%; padding: 2px;">Group Art Unit</td> </tr> <tr> <td style="padding: 2px;"></td> <td style="padding: 2px; text-align: center;">3634</td> </tr> </table>	Customer No.	Group Art Unit		3634
Customer No.	Group Art Unit						
	3634						
Title: A SHELF DISPLAY DEVICE							

COMMISSIONER FOR PATENTS:

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1. Revocation of Power of attorney with New Power of attorney and change of correspondence address

in the above identified application.

- ☒ No additional fee is required.
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- ☐ Charge the amount of _____
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- ☐ Payment by credit card. Form PTO-2038 is attached.

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Signature

Jerry H. Noh
 3435 Wilshire blvd suite 2741
 Los Angeles, CA 90010

Dated:

01/30/06

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on

2/06/06
 (Date)

Signature of Person Mailing Correspondence

Jerry H. Noh

Typed or Printed Name of Person Mailing Correspondence

cc:

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PTO/SB/82 (04-06)

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**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/821762
Filing Date	4/09/04
First Named Inventor	Jung Ki Lee
Art Unit	3634
Examiner Name	Lindsay Maguire
Attorney Docket Number	A440-JN

I hereby revoke all previous powers of attorney given in the above-identified application:

☐ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners associated with the Customer Number.

☐ Please change the correspondence address for the above-identified application to:

☐ The address associated with
Customer Number:

OR

☒ Firm or
Individual Name Jung Ki Lee

Address 8420 Santa Fe Springs Rd. # A

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State

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ZIP

90606

Country United States

Telephone 562-945-6947

Email

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71
Statement under 37CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature 

Name Jung Ki Lee

Date

January 12, 2006

Telephone

562-945-6947

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

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